

## UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No.

50277-2343

## TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, BENNY SOUDER, et al., entitled AUTOMATIC AND DYNAMIC PROVISIONING OF DATABASES, for a(n):

(X) Original Patent Application.

( ) Continuing Application (prior application not abandoned):

( ) Continuation ( ) Divisional ( ) Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ Filed on: \_\_\_\_\_

( ) A statement claiming priority under 35 USC § 120 has been added to the specification.

Enclosed are:

(X) Specification 33 Total Pages; (X) Drawing(s) 6 Total Sheets; (X) Cover Sheet 1 Page

(X) Oath or Declaration: 4 Pages

(X) A Newly Executed Combined Declaration and Power of Attorney:

(X) Signed. ( ) Unsigned. ( ) Partially Signed.

( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference in its entirety for all purposes.

( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

(X) Power of Attorney.

(X) Return Receipt Postcard.

( ) Associate Power of Attorney.

(X) A Check in the amount of \$1,242.00 for the Filing Fee.

( ) Preliminary Amendment.

( ) Information Disclosure Statement and Form PTO-1449.

( ) Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i)

(X) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.

( ) A Certified Copy of Priority Documents (if foreign priority is claimed).

( ) Applicant(s) is entitled to small entity status. See 37 CFR 1.27.

( ) Statement(s) of Status as a Small Entity Filed in Prior Application, Status Still Proper and Desired.

(X) Recordation of Assignment Cover Sheet and executed Assignment.

( ) Other: \_\_\_\_\_

## CLAIMS AS FILED

| FOR                                       | NO. FILED | NO. EXTRA | RATE    | FEE        |
|---|-----------|-----------|---------|------------|
| Total Claims                              | 44        | 24        | \$18.00 | \$ 432.00  |
| Independent Claims                        | 3         | 0         | \$86.00 | \$ 0.00    |
| Multiple Dependent Claims (if applicable) |           |           |         | \$0.00     |
| Assignment Recording Fee                  |           |           |         | \$40.00    |
| Basic Filing Fee                          |           |           |         | \$770.00   |
| Total Filing Fee                          |           |           |         | \$1,242.00 |

Charge \$ \_\_\_\_\_ to Deposit Account 50-1302 pursuant to 37 CFR § 1.25. Throughout the pendency of this application, please charge any additional fees, including any required extension of time fees, and credit all overpayments to deposit account 50-1302. A duplicate of this sheet is enclosed.

Respectfully submitted,

By: \_\_\_\_\_

MARCEL K. BINGHAM, Reg. No. 42,327

Date: November 20, 2003

Correspondence Address:

29989

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

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By: Trudy Bagdon

Typed Name: Trudy Bagdon

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Date of Deposit: November 21, 2003

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| <b>FEE TRANSMITTAL<br/>for FY 2003</b>   |                       |                       |                       | <b>Complete if Known</b>   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|--|-----------------------|-----------------------|-----------------------|--|-----------------------|-----------------------------------|-----------------------|-------------------|----------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|----------|------|-----|------|-----|-------------------------------------|--|------|-----|------|-----|---|--|------|-----|------|-----|---------------------------|--|------|-------|------|-------|--|--|---------------------|------|------|------|--|--------------------|--------------|---------------------|--------------|----------------|---|----|------|-----|-------|--------|--|---|------|-------|------|--------------------|---|--|------|-----|-----------------------|-----------------------|--|-----------------------|-----------------|----------|------|-----|---|---|------------------------|------|------|------|--|----|-----------------------------------|-----|------|-----|------------------|-----|---------------------------------------|-----|------|-----|--|----|---|-----|------|-----|--------------------------|---|---|-------|---------------------|-------|---|--|------|--------------------|--|----|----------------------------------|--|------|------|------|-----|------------------------------------|--|------|------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|---|--|------|-----|------|-----|---|--|------|----|------|----|--|-------|------|-----|------|-----|---|--|------|-----|------|-----|--|--|---------------------------|--|--|--|--|--|---------------------------|--|--|--|--|--|
| <p><i>Patent fees are subject to annual revision,<br/>Small Entity payments must be supported by a small entity statement,<br/>otherwise large entity fees must be paid. See Forms PTO/SB/09-12.<br/>See 37 C.F.R. §§ 1.27 AND 1.28</i></p>  |                       |                       |                       | Application Number   |                       | Not yet available                 |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|  |                       |                       |                       | Filing Date  |                       | Herewith                          |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|  |                       |                       |                       | First Named Inventor   |                       | BENNY SOUDER                      |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|  |                       |                       |                       | Examiner Name  |                       | Not yet available                 |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|  |                       |                       |                       | Group/Art Unit   |                       | Not yet available                 |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT  |                       | (\$)                  |                       | 1,242.00   |                       | Attorney Docket No.               |                       | 50277-2343        |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <b>METHOD OF PAYMENT (check one)</b>   |                       |                       |                       | <b>FEE CALCULATION (continued)</b>   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <p>1. <input checked="" type="checkbox"/> Throughout the pendency of this application, please charge any additional fees, including any required extension of time fees, and credit all overpayments to deposit account 50-1302. A duplicate of this sheet is enclosed.</p> <p>Deposit Account Number: 50-1302</p> <p>Deposit Account Name: Hickman Palermo Truong &amp; Becker, LLP</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:<br/> <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p> <p>3. <input type="checkbox"/> Applicant(s) is entitled to small entity status.<br/>See 37 CFR 1.27.</p>   |                       |                       |                       | <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> </tbody> </table> |                       |                                   |                       |                   |          | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description    | Fee Paid | 1051 | 130 | 2051 | 65  | Surcharge - late filing fee or oath |  | 1052 | 50  | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet. |  | 1053 | 130 | 1053 | 130 | Non-English specification |  | 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination |  | 1804                | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |                    | 1805         | 1,840*              | 1805         | 1,840*         | Requesting publication of SIR after Examiner action |    | 1251 | 110 | 2251  | 55     | Extension for reply within first month |   | 1252 | 420   | 2252 | 210                | Extension for reply within second month |  | 1253 | 950 | 2253                  | 475                   | Extension for reply within third month |                       | 1254            | 1,480    | 2254 | 740 | Extension for reply within fourth month |   | 1255                   | 2010 | 2255 | 1005 | Extension for reply within fifth month |    | 1401                              | 330 | 2401 | 165 | Notice of Appeal |     | 1402                                  | 330 | 2402 | 165 | Filing a brief in support of an appeal |    | 1403  | 290 | 2403 | 145 | Request for oral hearing |   | 1451  | 1,510 | 1451                | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110                | 2452   | 55 | Petition to revive - unavoidable |  | 1453 | 1330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Petitions related to provisional applications |  | 1806 | 180 | 1806 | 180 | Submission of information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | Other fee (specify) _____ |  |  |  |  |  | Other fee (specify) _____ |  |  |  |  |  |
| Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1051   | 130                   | 2051                  | 65                    | Surcharge - late filing fee or oath  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1052   | 50                    | 2052                  | 25                    | Surcharge - late provisional filing fee or cover sheet.  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1053   | 130                   | 1053                  | 130                   | Non-English specification  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1812   | 2,520                 | 1812                  | 2,520                 | For filing a request for reexamination   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1804   | 920*                  | 1804                  | 920*                  | Requesting publication of SIR prior to Examiner action   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1805   | 1,840*                | 1805                  | 1,840*                | Requesting publication of SIR after Examiner action  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1251   | 110                   | 2251                  | 55                    | Extension for reply within first month   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1252   | 420                   | 2252                  | 210                   | Extension for reply within second month  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1253   | 950                   | 2253                  | 475                   | Extension for reply within third month   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1254   | 1,480                 | 2254                  | 740                   | Extension for reply within fourth month  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1255   | 2010                  | 2255                  | 1005                  | Extension for reply within fifth month   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1401   | 330                   | 2401                  | 165                   | Notice of Appeal   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1402   | 330                   | 2402                  | 165                   | Filing a brief in support of an appeal   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1403   | 290                   | 2403                  | 145                   | Request for oral hearing   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1451   | 1,510                 | 1451                  | 1,510                 | Petition to institute a public use proceeding  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1452   | 110                   | 2452                  | 55                    | Petition to revive - unavoidable   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1453   | 1330                  | 2453                  | 665                   | Petition to revive - unintentional   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1501   | 1330                  | 2501                  | 665                   | Utility issue fee (or reissue)   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1502   | 480                   | 2502                  | 240                   | Design issue fee   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1503   | 640                   | 2503                  | 320                   | Plant issue fee  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1460   | 130                   | 1460                  | 130                   | Petitions to the Commissioner  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1807   | 50                    | 1807                  | 50                    | Petitions related to provisional applications  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1806   | 180                   | 1806                  | 180                   | Submission of information Disclosure Stmt  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 8021   | 40                    | 8021                  | 40                    | Recording each patent assignment per property (times number of properties)   | 40.00                 |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1809   | 770                   | 2809                  | 385                   | Filing a submission after final rejection (37 CFR § 1.129(a))  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1810   | 770                   | 2810                  | 385                   | For each additional invention to be examined (37 CFR § 1.129(b))   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Other fee (specify) _____  |                       |                       |                       |  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Other fee (specify) _____  |                       |                       |                       |  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <b>FEE CALCULATION</b>   |                       |                       |                       |  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$ 770.00)</b></td></tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Highest Paid Claims</th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>44</td> <td>20</td> <td>24</td> <td>18.00</td> <td>432.00</td> </tr> <tr> <td>3</td> <td>3</td> <td>0</td> <td>86.00</td> <td>0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent</td> <td></td> </tr> </tbody> </table> <p><i>**or number previously paid, if greater; For Reissues, see below</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td><b>(\$ 432.00)</b></td></tr> </tbody> </table> |                       |                       |                       | Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code             | Small Entity Fee (\$) | Fee Description   | Fee Paid | 1001                  | 770                   | 2001                  | 385                   | Utility filing fee |          | 1002 | 340 | 2002 | 170 | Design filing fee                   |  | 1003 | 530 | 2003 | 265 | Plant filing fee  |  | 1004 | 770 | 2004 | 385 | Reissue filing fee        |  | 1005 | 160   | 2005 | 80    | Provisional filing fee                 |  | <b>SUBTOTAL (1)</b> |      |      |      |  | <b>(\$ 770.00)</b> | Total Claims | Highest Paid Claims | Extra Claims | Fee from Below | Fee Paid  | 44 | 20   | 24  | 18.00 | 432.00 | 3                                      | 3 | 0    | 86.00 | 0.00 | Multiple Dependent |   |  |      |     | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code                  | Small Entity Fee (\$) | Fee Description | Fee Paid | 1202 | 18  | 2202                                    | 9 | Claims in excess of 20 |      | 1201 | 86   | 2201                                   | 43 | Independent claims in excess of 3 |     | 1203 | 290 | 2203             | 145 | Multiple dependent claim, if not paid |     | 1204 | 86  | 2204                                   | 43 | **Reissue independent claims over original patent |     | 1205 | 18  | 2205                     | 9 | **Reissue claims in excess of 20 and over original patent |       | <b>SUBTOTAL (2)</b> |       |   |  |      | <b>(\$ 432.00)</b> | <p><b>3. SUBTOTAL (3)</b></p> <p>*Reduced by Basic Filing Fee Paid</p> <p><b>SUBTOTAL (3)</b> (\$ 40.00)</p> |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1001   | 770                   | 2001                  | 385                   | Utility filing fee   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1002   | 340                   | 2002                  | 170                   | Design filing fee  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1003   | 530                   | 2003                  | 265                   | Plant filing fee   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1004   | 770                   | 2004                  | 385                   | Reissue filing fee   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1005   | 160                   | 2005                  | 80                    | Provisional filing fee   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <b>SUBTOTAL (1)</b>  |                       |                       |                       |  | <b>(\$ 770.00)</b>    |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Total Claims   | Highest Paid Claims   | Extra Claims          | Fee from Below        | Fee Paid   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 44   | 20                    | 24                    | 18.00                 | 432.00   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 3  | 3                     | 0                     | 86.00                 | 0.00   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Multiple Dependent   |                       |                       |                       |  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1202   | 18                    | 2202                  | 9                     | Claims in excess of 20   |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1201   | 86                    | 2201                  | 43                    | Independent claims in excess of 3  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1203   | 290                   | 2203                  | 145                   | Multiple dependent claim, if not paid  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1204   | 86                    | 2204                  | 43                    | **Reissue independent claims over original patent  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| 1205   | 18                    | 2205                  | 9                     | **Reissue claims in excess of 20 and over original patent  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <b>SUBTOTAL (2)</b>  |                       |                       |                       |  | <b>(\$ 432.00)</b>    |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| <b>SUBMITTED BY</b>  |                       |                       |                       |  |                       |                                   |                       |                   |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Name (Print/Type)  |                       |                       |                       | MARCEL K. BINGHAM  |                       | Registration No. (Attorney/Agent) |                       | 42,327            |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
| Signature  |                       |                       |                       |   |                       | Telephone                         |                       | (408) 414-1080    |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |
|  |                       |                       |                       |  |                       | Date                              |                       | November 21, 2003 |          |                       |                       |                       |                       |                    |          |      |     |      |     |                                     |  |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |                     |      |      |      |  |                    |              |                     |              |                |   |    |      |     |       |        |  |   |      |       |      |                    |   |  |      |     |                       |                       |  |                       |                 |          |      |     |   |   |                        |      |      |      |  |    |                                   |     |      |     |                  |     |                                       |     |      |     |  |    |   |     |      |     |                          |   |   |       |                     |       |   |  |      |                    |  |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |   |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |

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